



**Testimony before the Government Administration & Elections Committees
2.28.11**

**In support of
SB 1059, AA Implementing the Recommendations of the Commission on
Enhancing Agency Outcomes
Sections 20, 21, 23, 294, 308 and 312**

Senator Slossberg, Representative Morin and members of the committees, my name is Ron Cretaro and I am the Executive Director of Connecticut Association of Nonprofits (CT Nonprofits). We represent over 500 nonprofits, 300 of which hold purchase of service (POS) contracts with the state to provide health and human services on its behalf. I am here today to support several of the recommendations of the Commission on Enhancing Agency Outcomes included in Senate Bill 1059.

Sections 20 and 21 of this bill call for the creation of two working groups that will develop plans for the deinstitutionalization of residents at Southbury Training School and Riverview Hospital. These are state-run institutions that serve individuals with developmental disabilities and children with severe and complex psychiatric and medical needs, respectively.

We are glad that the proposed working groups include representation from the residents, advocacy groups and private providers. Over the years, much consideration has been given to the possibility of moving the individuals housed in these facilities into the community to receive treatment. We support the efforts of the Commission to study the feasibility of moving any residents, where possible, into the community to receive treatment and look forward to working with the state on this matter.

Section 23 of this bill calls for the Secretary of OPM to work with the state's five main health and human services agencies (DPH, DDS, DCF, DMHAS and DSS) to create a plan for the consolidation of their personnel, payroll, affirmative action and business office functions. We urge the Committee to include in the business office functions referenced in this section the contracting and data collection functions of these agencies. Many nonprofits hold contracts with multiple state agencies and must provide duplicative information regarding their contracts to multiple agencies. Consolidating these efforts would alleviate some of the silos that exist among state agencies that pose significant challenges to private providers that hold contracts to provide services on the state's behalf.

Section 294 of this bill calls for the Secretary of OPM to work with the state's five main health and human services agencies (DPH, DDS, DCF, DMHAS and DSS) to review all existing purchase of service contracts and devise a system to consolidate said contracts. Consolidating the number of contracts within a single state agency will certainly reduce a great deal of administrative burden on both state agencies and private providers by reducing duplicative paperwork.

However, as I previously mentioned, a great deal of duplication also occurs between state agencies during the contracting process. Two state agencies may require the exact same demographic or fiscal information from a provider that holds contracts with both agencies. Both state agencies inevitably use two different reporting systems that cannot communicate with each other so the nonprofit must provide the same information twice. Any steps that can be taken to reduce such duplication either within or across state agencies would be welcomed.

Section 308 of this bill requires the Commissioner of the Department of Social Services to apply for a federal 1915(c) Medicaid waiver for home and community-based services for elderly and disabled persons receiving benefits under the Medicaid program. The Departments of Social Services and Developmental Services have jointly submitted an application for this waiver to the Centers for Medicare and Medicaid Services (CMS). The purpose of the new waiver is to continue Connecticut's move toward increasing individual choice, self-direction and control over resources necessary for individuals to live

independently or in their family home. We support the efforts of the Commission to increase the ability of individuals to live in the community and avoid institutionalization.

Section 312 requires the Commissioner of the Department of Social Services to designate an employee to act as a federal revenue ombudsman. The ombudsman will ensure that the department takes advantage of opportunities to obtain or increase federal funding for programs administered by the Department. CT Nonprofits supports efforts by the state to maximize federal revenue as many opportunities exist for the state to capture federal reimbursement for health and human services. Increasing federal revenue for these services is a better option than reducing services to the state's most vulnerable, which is often a step the state looks to take during times of a budget deficit.

We appreciate the work that the Commission on Enhancing Agency Outcomes has done over the past two years, including its recognition of many of the challenges faced by both the state and nonprofit providers and its recommendations for improvement. We look forward to working with the state in any manner that is helpful on these issues.

Thank you for your attention to this matter. Please do not hesitate to contact me with any questions.

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